Quantity Purchase Agreement With The State Of Indiana

Vendor ATC HEALTHCARE SERVICES, INC. Remit to: 1983 MARCUS AVE STE E-122

LAKE SUCCESS NY 11042

ATC HEALTHCARE SERVICES, INC. Name and

Address Cntct: JILL BUSH

13675 SOUTH CICERO AVE of Vendor:

Crestwood IL 60445

Qty Purchase Agreement QPA Number Page 0000000000000000000009698 1 **of** 1

Requisition Nbr.: ASA5-5-41 (RFP 4-86)

Effective Date: 08/15/2004 **Expiration Date:** 08/14/2006

Agency Number:

All State Agency Facility: 5816<u>42356</u> Vendor Federal ID:

Vendor Telephone Nbr: 317/251-1135--Name Of Contact Pers: JILL BUSH **FAX Number:** 317/251-1145--

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity UNIT

1

Article and Description

Unit Price

This is an award of a Quantity Purchase Agreement for Nursing Services for a period of one year to begin August 15, 2004 and end August 14, 2006 or two years from date of last signature.

Instructions for use of this contract can be found at www.in.gov/idoa/proc and click on the following:

- 1. Quantity Purchase Agreements
- Instructions for Nursing Contracts

QPA can be mutually renewed yearly for three additional years.

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities are estimates and could be more or less. The awarded vendor must maintain, at a minimum, the following information and be capable of supplying a report within one week of a request by the State:

- 1. Quantity and Type of Products, including any options, purchased by any State Agency and/or Political Subdivision, separated by each.
- 2. Total Dollar value of purchases made, separated by State Agency and/or Political

9,9999,999,999.00 HUR00000000100011015 >> Description not available - Check item active/inactive and availability <<

0.0001

The following UN/CEFACT Unit of Measure Common Codes are used in this document: HUR Hour

Indianapolis, Indiana 46204 Telephone: (317) 232-3053

Signature of Purchasing Officer	Typed Name Date Signed	Signature Of Approval Office Of the State Attorney General Typed Name	Date Signed
Authorized Signature Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468			1